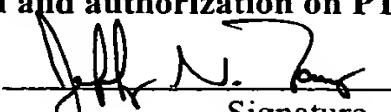


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 201009-007000
<b>CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]</b>  I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____.	In re Application of <b>Stephen J. FONASH</b>	
	Application Number <b>09/836,449</b>	Filed <b>04/17/01</b>
For: DEPOSITED THIN FILMS AND THEIR USE IN SEPARATION AND SACRIFICIAL LAYER APPLICATIONS		
Group Art Unit: <b>2812</b>	Examiner: <b>Richard A. BOOTH</b>	
Signature: _____ Name: _____		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and appropriate entity fee are as follows (check time period desired):		
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110)      \$ <b>55.00</b> <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$210/\$420)      \$ _____ <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$475/\$950)      \$ _____ <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$740/\$1480)      \$ _____ <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1005/\$2010)      \$ _____		
<input checked="" type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> A check to cover the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u> . I have enclosed a duplicate copy of this sheet.		
I am the <input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.		
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>		
<u>November 14, 2003</u> Date <u>12/08/2003</u> SLUANG1 00000008 192380 09836449 01 FC:2251 55.00 DA		 Signature <u>Jeffrey N. Townes</u> Typed or printed name
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.		

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